## MULTIPLE DEPENDENT CLAIM 5TU7532270 FILING DATE FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANTES **CLAIMS** AFTER AFTER AS FILED AFTER AFTER AS FILED I"AMENDMENT 2 <sup>™</sup> AMENDMENT I" AMENDMENT. 2 AMENDMENT IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. (G)(G) i .9 <u>62</u> 27 TOTAL IND TOTAL IND

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